PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee antifications. maintenance fee notifications.

CURRENT CORRESPOND	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.							
2033 K STREET SUITE 800	7590 10/08 H, LIND & PONA Γ N. W. J, DC 20006-1021			Cert	ificate	of Mailing or Transn		
Wildim (OTO)	, DC 20000°1021		ļ				- Walter	(Depositor's name)
			j	<u> </u>				(Signature)
			Į	L				(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	TOR		ATTO	RNEY DOCKET NO.	CONFIRMATION NO.
10/526,780 TITLE OF INVENTION	05/20/2005 : MEDICINAL COMPO	DSITION	Akihiko Kitajima	2005-0265A 12/31/2008 SDENBOB4 00000041 10526788			8813 10526780	
*					01 FC:: 02 FC::			1510.00 OP 309.00 OP
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DI	UE I	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300		\$0	-	\$1810	01/08/2009
EXAM	INER	ART UNIT	CLASS-SUBCLASS					
LEWIS,	AMY A	1614	514-426000					
PLEASE NOTE: Unl recordation as set fort	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) adata will appear on the patent. If an assignee is identified below, the document has been filed for Ta substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
NAGASE C	HEMTEX CORP	ORATION	OSAKA,	JA	PAN			
Please check the appropri	iate assignee category or	categories (will not be pr	rinted on the patent):	O I	ndividual 🛂 Co	rporatio	on or other private grou	up entity Government
4a. The following fee(s) a Issue Fee Publication Fee (N Advance Order - 4	4b. Payment of Fee(s): (Please first reapply any profitors) pair is ue fee shown above) A check is enclosed. Check No. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).							
5. Change in Entity Stat	tus (from status indicated s SMALL ENTITY statu		Dh Amiliansians	1	l-:: D34AF	r reder	TTT	D 107()(0)
NOTE: The Issue Fee and	d Publication Fee (if requ	uired) will not be accepted	d from anyone other tha				ITY status. See 37 CF.	assignee or other party in
Authorized Signature	all Oh	tes Patent and Trademark	Office.	· · · · · · · · · · · · · · · · · · ·	_{Date} Dec	emb	er 30, 200	8
Typed or printed name	William R	. Schmidt,	II		Registration No		58,327	
This collection of informan application. Confident submitting the completed this form and/or suggesting N450, Alexandria, V	ation is required by 37 C iality is governed by 35 application form to the ons for reducing this bui irginia 22313-1450. DC	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the NOT SEND FEES OR	on is required to obtain 1.14. This collection is depending upon the ine Chief Information Of COMPLETED FORMS	or reta s estim ndividi fficer, S TO	ain a benefit by th nated to take 12 m ual case. Any cor U.S. Patent and T ITHIS ADDRESS.	e publi inutes nments Tradem SEND	c which is to file (and to complete, including on the amount of tim ark Office, U.S. Depar TO: Commissioner fo	by the USPTO to process) gathering, preparing, and e you require to complete timent of Commerce, P.O. or Patents, P.O. Box 1450,

overpayment associated with this communication to Deposit Account No. 23-0975. PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

The Commissioner is authorized to charge any deficiency or to credit any

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be

maintenance fee notification	ons.	inciwise in block i, by	(a) specifying a new con	maintenance fees respondence address	will be mailed to the ci ; and/or (b) indicating	urrent correspondence address as a separate "FEE ADDRESS" for			
		llock 1 for any change of address)	Fe pa	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
WENDEROTH, 2033 K STREET I SUITE 800 WASHINGTON, I	LIND & PONA N. W.	8/2008 ACK, L.L.P.	I Si ad tra	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
Whom to tot,	DC 20000-1021					(Depositor's name)			
			-			(Signature)			
APPLICATION NO.	FIL DIG DATE				T	(Date)			
10/526,780	FILING DATE		FIRST NAMED INVENTO	OR ATTORNEY DOCKET NO.		NO. CONFIRMATION NO.			
TITLE OF INVENTION: M	05/20/2005 ÆDICINAL COMPO	DSITION	Akihiko Kitajima		2005-0265A	8813			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTAL FEE(S)	DIE DATE DIE			
nonprovisional	NO	\$1510	\$300	\$0	\$1810	DATE DUE 01/08/2009			
EXAMINE	ER	ART UNIT	CLASS-SUBCLASS	٠	41010	01/06/2009			
LEWIS, AN	MY A	1614	514-426000	J					
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON			(1) the names of up to agents OR, alternate (2) the name of a sing registered attorney or —2 registered patent att listed, no name will be	of a single firm (having as a member a corney or agent) and the names of up to content attorneys or agents. If no name is me will be printed.					
	an assignee is identi 137 CFR 3.11. Comp EE EMTEX CORP	fied below, no assignee letion of this form is NO	data will appear on the T a substitute for filing ar (B) RESIDENCE: (CIT OSAKA,	patent. If an assigned assignment. Y and STATE OR C	OUNTRY)	the document has been filed for			
4a. The following fee(s) are: Issue Fee Publication Fee (No si	submitted:	4b	b. Payment of Fee(s): (Please first reapply any province private group entity Government above) A check is enclosed. Check No. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).						
5. Change in Entity Status (a. Applicant claims SN NOTE: The Issue Fee and Pu	MALL ENTITY status	s. See 37 CFR 1.27.	b. Applicant is no los	ger claiming SMAL	L ENTITY status. See 3				
interest as shown by the reco	rds of the United State	es Patent and Trademark	Office.	me applicant; a regis	tered attorney or agent;	or the assignee or other party in			
Authorized Signature	Illm 94	7		Date Dec	ember 30, 2	2008			
Typed or printed name					58,327				
This collection of information in application. Confidentialit submitting the completed app his form and/or suggestions 30x 1450, Alexandria, Virgin Alexandria, Virginia 22313-1 Juder the Paperwork Reduction	450.				10. Continission	(and by the USPTO to process) uding gathering, preparing, and of time you require to complete Department of Commerce, P.O. ner for Patents, P.O. Box 1450,			

The Commissioner is authorized to charge any deficiency or to credit any overpayment associated with this communication to Deposit Account No. 23-0975.